

# OPERATIONS UPDATE



International Federation of Red Cross and Red Crescent Societies  
Fédération internationale des Sociétés de la Croix-Rouge et du Croissant-Rouge  
Federación Internacional de Sociedades de la Cruz Roja y de la Media Luna Roja  
الاتحاد الدولي لجمعيات الصليب الأحمر والهلال الأحمر

## INDONESIA: YOGYAKARTA EARTHQUAKE

Appeal No. MDRID001  
15 October 2007

*The Federation's mission is to improve the lives of vulnerable people by mobilizing the power of humanity. It is the world's largest humanitarian organization and its millions of volunteers are active in over 185 countries.*

### In Brief

Operations Update no. 19; Period covered: 1 July to 30 September 2007; CHF 37,150,648 (USD 30,953,600 or EUR 22,432,580); Appeal coverage: 100.16%

[<click here to go directly to the attached Donor Response List, also available on the website under Contributions>.](#)

#### Appeal history:

- Preliminary appeal launched on 27 May 2006 for CHF 12,834,000 (USD 10.4 million or EUR 8.2 million) to assist 200,000 beneficiaries for eight months
- Revised appeal launched on 6 June 2006 for CHF 38,045,439 (USD 31 million or EUR 24 million) to assist 325,000 beneficiaries for 12 months.
- Revised appeal is extended to 31 December 2007 on 6 June 2007.
- Appeal revised on 15 July 2007 to CHF 37,150,648 (USD 30,953,600 or EUR 22,432,580).

#### Operational Summary:

To date, more than 112,000 people have been identified as beneficiaries in the recovery phase. This number includes the community in the affected areas of the Yogyakarta earthquake which are under health and disaster management programmes; the branch board volunteers, management, staff, and service delivery volunteers in the PMI DIY (Daerah Istimewa Yogyakarta/Special Region of Yogyakarta) chapter as one of the objectives of organizational development programme. Since the appeal duration has been extended to 31 December 2007, this will allow the initial phases of the community-based risk reduction pilot project to be implemented and its methodology monitored and reviewed. At the same time, it will allow the consolidation of the rehabilitation programme to meet recommendations outlined in a recent review of organizational development initiatives. This extension to the appeal timeframe also further permits exit planning and integration of longer term activities into the PMI's country strategy.

The risk reduction pilot project is planned for six villages in six branches – including PMI Klaten Branch (Central Java Province). However, based on the assessment, there are now seven villages in six branches, with the PMI Gunungkidul Branch having two. Some training was conducted in the initial phase. Volunteers have been deployed and are familiarizing the community with the project. Communities themselves have started carrying out participatory risk assessment (PRA) while baseline surveys by PMI volunteers are ongoing. The water and sanitation team, and the rehabilitation team have conducted assessments of accessibility for disabled people as part of the accessibility improvement programme.

*For longer-term programmes in this or other countries or regions, please refer to the Federation's Annual Appeal. For support to or for further information concerning Federation programmes or operations in this or other countries, or for national society profiles, please access the Federation's website at <http://www.ifrc.org>.*

## Background

An earthquake with a magnitude of 6.3 on the Richter scale (source: USGS) struck near the city of Yogyakarta in Central Java at 05:54 hrs local time on 27 May 2006 causing extreme and widespread destruction. There was considerable loss of life and prevalence of injury. Villages in more remote areas south of Yogyakarta, in Bantul and its surrounding areas were the most affected. The official figures remain at 5,749 people killed, over 38,000 injured and more than 127,000 houses completely destroyed, with over 450,000 additional houses damaged by the earthquake. It is estimated that 1,173,742 people were made homeless. The earthquake's epicentre was located some 20 km southeast of Yogyakarta at a depth of 10 km. Tremors were felt across the region as far away as Semarang and Surabaya on the opposite coast of Java.

In the early days of the operation, a needs assessment with communities was carried out concurrently with relief operations to determine the starting point for earliest recovery. The result of the assessment identified the need for shelter. It also indicated that the community worked with local systems of mutual support (*gotong royong*). The Indonesian Red Cross (Palang Merah Indonesia/PMI) and the Federation developed a community cash-based shelter programme forming the basis of the early recovery. Other significant ongoing activities since the relief operation are the psychosocial support and rehabilitation programmes as well as water and sanitation projects which include clean water supply, provision of latrines, and cleaning and deepening of wells.

## Operational developments

The Yogyakarta earthquake operation has been ongoing for one year and four months. Longer-term recovery needs of the affected community have brought about an agreement between the delegation and the PMI branch in Yogyakarta. This agreement comprises collaborating on a risk reduction pilot project focused on strengthening the community through disaster risk reduction activities. This project includes improving accessibility for disabled people by adapting shelters and latrines to meet their needs.

The rehabilitation programme will continue until December 2007, after which the government will provide support for the programme. The psychosocial support programme (PSP) will expand and has started assessment in a new area. The Federation organizational development unit works closely with all programmes and continues to support both Yogyakarta and Central Java chapters. The volunteers in the risk reduction pilot project have been deployed to the targeted villages, starting the initial phase, which includes assisting the community in implementing participatory risk assessment (PRA) as well as baseline surveys.

Recently, there have been some minor earthquakes according to the Indonesian meteorology and geophysics agency (Badan Meteorologi dan Geofisika/BMG). A 2.8 Richter scale quake shook Yogyakarta on 18 September and while it was not a major earthquake but it served as a reminder that Yogyakarta is an earthquake prone area. Meanwhile, the Merapi volcano activity is still being monitored by the government and still warrants alert status. Some hot clouds have been reported but activity has since decreased.

Government funding for permanent housing has been released for affected communities with moderately damaged houses, amounting to 8,903 households in 197 community groups. Government focus will now move to houses which sustained minor damages.

## Red Cross and Red Crescent action - objectives, progress, impact

### Health

**Overall Goal: The mortality and morbidity amongst the affected population is reduced to pre-disaster levels by addressing the immediate basic health care needs and future health risks through preventive and basic health care interventions.**

**Objective 1: To strengthen earthquake-affected communities' resilience through access to PMI's community and school-based PSP (psycho-social support programmes).**

During the period in review, the PMI/Federation PSP implemented 141 activities (including singing, dancing, drawing, painting, first aid and avian influenza health promotion, and a fashion show). Participants involved a total of 7,696 people in four sub-villages and four schools. In the month of August, the communities and school children were excited to reactivate the independence festival. Many activities which could not be conducted last year, due to the communities' trauma and condition after the earthquake, were held again.



Volunteers display the creation of teachers in Bantul, which is used in story telling for the children.

The process of developing a crisis response plan programme in the school has started. A committee in the school will be established consisting of teachers, parents, and students. This committee will plan how to respond to a disaster, such as establishing an evacuation track in their school. Observing the changes in a child's behaviour after the earthquake which are not always seen distinctly (e.g. from a lively child to a shy child; from an independent to a dependent one; from a quiet to a hyper-active child), the PSP team has also planned to conduct a session with teachers and parents (either in the form of discussion or training) on children management behaviour.

Capacity building for volunteers is also part of the programme. Up to September, several activities have been implemented to upgrade the capacity of the volunteers. The activities include training on SWOT<sup>1</sup> analysis, training on stress management, and psychological first aid (PFA) training as well as training in child development.

In September, PSP teams from both the Bantul and Klaten branches prepared for expansion to new areas. They have started to map out the capacity of the team and current area, and will conduct assessments of the communities and schools in the future target areas.



Home care activity of the PMI-Federation medical rehabilitation clinic. A client is visited by a volunteer regularly for therapy.

**Objective 2: To reduce the mortality and morbidity among the affected population in selected areas to pre-disaster levels by addressing the immediate basic health care needs and future health risks through preventative and basic health care interventions.**

Treatment and routine activities continue at the Klaten and Bantul branches. Klaten branch has 37 clients and has finished conducting the second phase of training on the personal goal and bio-psychosocial approach in the first week of September. They have also carried out the first peer group discussion facilitated by the branch chairman on 11 September with eight clients, five of whom suffered spinal cord injury (SCI). Training on the use of the Nelathon catheter was carried out in September for three clients suffering from SCI.

Meanwhile, the Bantul branch has 114 clients and has received Federation recommendations concerning referral issues for removing orthopaedic pins or plates. Only three clients need to be evaluated by the hospital in order to get more detail information for pin removal. Based on the diagnosis, most PMI/Federation clients need a minimum of two years after the first surgery to have the pin removed.

During the fasting month, the Bantul rehabilitation team are taking steps to develop their relationship with the PMI/Federation clients. They carry out *Tarawih Keliling*. *Tarawih* is a tradition to pray together in the evening during Ramadhan, and for this, the volunteers alternate visits among clients every day to pray together with them. The same thing goes for *Gerebeg Sahur*, which is the meal before the daybreak during the fasting month, where the volunteers visit the clients and

<sup>1</sup> Strengths, weaknesses, opportunities, threats

cook with the family. Also, at the end of September, the physiotherapists, nurses and a doctor attended the first training on the personal goal and bio-psychosocial approach.

**Objective 3: To provide support and assistance to vulnerable communities in containing AI outbreaks and preparing for AI pandemic.**

The Kota Yogyakarta and Gunungkidul branches still continue the implementation of health education in their areas. In September, the Gunungkidul branch carried out dissemination of information on avian influenza via Radio Argososro for a week. Direct socialization with the community of the Piyaman village, Wonosari was also carried out to raise community awareness on AI.

### Disaster preparedness and risk reduction

**Overall Goal: To reduce losses and suffering of vulnerable communities due to disasters through risk reduction and strengthening of preparedness and emergency response capacities of Indonesian Red Cross.**

**Objective: The recovery, resilience, and response capacity of earthquake-affected families and the PMI in Yogyakarta and Central Java Provinces is improved.**

#### 1. Disaster management capacity building in Central Java chapter and branches

Disaster management (DM) capacity building is not only about assisting emergency response but also capacity building in response and preparedness. According to the MOU between the Federation with the chapters of Yogyakarta and Central Java, the Federation will support the training of PMI Satgana (emergency response team) at chapter and branch level. The Federation assisted PMI Central Java chapter in establishing a *Posko* (command post) by providing training and the necessary equipment.

While those activities are still ongoing, the DM unit of Yogyakarta has been on standby to support Jakarta in terms of disaster response outside Yogyakarta. To date, they have assisted PMI in landslides and floods response in Central Sulawesi from end July until beginning of August, where 500 families were provided with 1,000 tarpaulins and 500 hygiene kits. The DM unit of the Federation sub-delegation in Yogyakarta also assisted in the Bengkulu earthquake response by deploying personnel to affected areas in Bengkulu.

#### 2. Community-based risk reduction pilot project in a recovery setting

This pilot project is an integrated programme involving all sectors in the PMI/Federation. The activities are village/sub-village planning to reduce risk/threat/disaster, village mapping, community media information development, and improving accessibility for disabled people.

The targeted villages for the pilot project are in five branches in the Yogyakarta Province and one branch in the Central Java Province. Threats existing in those targeted villages include flood, landslide, drought, environmental health, diseases, environmental sanitation, potential tsunami, and beach abrasion. Almost all the branches have deployed their volunteers since July, to the community and have set up their base camps, located at local community members' houses or in the community centre.



Facilitated by PMI volunteers, the women group enthusiastically to carry out the problem tree exercise in Mundon sub-village as part of the participatory rural appraisal (PRA).

The activities within the programme include establishing the team, producing terms of reference and an international competitive bidding (ICB) proposal, carrying out assessments at pilot project sites, coordinating with other stakeholders for general support, and analyzing the primary data obtained from survey and interview,

Outreach activities comprise enhancing socialization of the programme to the local government, attending meetings and discussions with focus groups to perform participatory rural appraisal (PRA) as well as vulnerability and capacity

assessment (VCA), recruiting village volunteers who will replace the PMI in the future, and conducting a baseline survey within two weeks.

After the community conducted PRA (spot mapping) to produce an accurate and scaled map, the volunteers carried out village mapping using gauge, compass, and GPS. PMI has produced a pamphlet to disseminate the information about the community activities and information on the PMI itself. Each branch has a different type and title of media, chosen in consideration of the local conditions such as different capacities, characteristics, and different methodologies. Some branches are new at producing media for dissemination, while other branches have strong communication and an urban community audience. A monitoring and evaluation exercise is expected to be held within the next month in order to improve the quality of the media.

Reception of the programme is generally positive. There is, however, ongoing discussion on how the programme should be named i.e. the use of community organized and based activities (COBA) as opposed to integrated community based risk reduction (ICBRR) activities, despite being the same type of programme. Programmes known as ICBRR are operating in other parts of the country and there is concern that the use of a different name will cause confusion for PMI chapters, branches, volunteers and the community.

To clarify things, the Federation held a meeting in Jakarta with PMI headquarters and several partner national societies (PNS). As a result of this meeting, the Federation will support PMI in conducting a special clarification session on the programme. This session will provide an opportunity for stakeholders to offer their input on the concept and implementation. Participants will come from the PMI headquarters, chapters and branches (where the programme is implemented), Federation, and PNS involved in the programme.

For the month of October, the Federation's organizational development (OD) unit also plans to commence branch capacity assessment for Central Java after the Idul Fitri holiday.

### **3. Improving accessibility for disabled people**

This programme is a collaborative effort between the risk reduction pilot project and health (water and sanitation rehabilitation) and is being implemented in Klaten, Central Java Province. Five pilot tests have been started, and the programme itself is currently in the preliminary assessment phase.

The PMI Klaten Branch water and sanitation team has been divided into two categories: a Wet team to address structures below ground such as piping, septic tanks, well-deepening, and related activities; and a Dry team to address structures above ground such as superstructure, hand railings, ramps, etc. The water and sanitation team is also working on the communal wash water supply and latrines in Gunungkidul. At the moment, the team is waiting for the PRA/VCA activities to be completed in order to determine which water and sanitation needs and interventions may be prioritized by the pilot project villages.

Coordination across sectors is essential in this programme. The health rehabilitation team monitors the socialization of the programme with regard to health, and provides integrated guidance for the adaptation of the latrines. The water and sanitation team controls the quality of the physical adaptation. The pilot project team is monitoring the community development process and the activity of community involvement in the programme. The finance team is responsible for controlling the budget and transferring funds to the community bank account once the project for latrine construction itself has been approved and is ready to begin.

### **Organizational Development**

**Overall Goal: The earthquake-affected PMI chapters' and branches' institutional capacity and performance, including the administrative and operational management of the organization and its activities is improved.**

#### **Objectives:**

- 1. Governance and Management capacity of PMI DIY and Central Java chapters and branches are improved;**
- 2. To improve the organizational systems (administrative and financial), policies, and procedures in place and implemented in PMI DIY chapter and selected branches in Central Java;**

3. To improve the awareness of need for diversified income sources at chapter level and the sustainability in PMI DIY;
4. The training plans are developed based on identified needs of chapter and branches in terms of organizational capacity building and programme support;
5. To improve the internal dialogue and co-ordination in and among chapter and branches, and to strengthen public image of chapter and its activities.

Over the past few months, the organizational development (OD) unit has focused on supporting the PMI Yogyakarta chapter. They have been working closely together with the Federation's pilot project team and the PMI on the design of the pilot project implementation guidelines and clarification of operational support for chapters and branches.

In the training component, the OD unit has coordinated training plans with other partner national societies (PNS). They have also supported the PMI Chapter of Yogyakarta in how to prioritize training, including proposal writing and budgeting.

In regards to information technology (IT), the Federation has provided support for branches during a major security problem in relation to virus attack.

The Federation also provides ongoing support to both PMI chapters of Yogyakarta and Central Java in relation to establishing, maintaining and improving communication and coordination mechanisms in the PSP, rehabilitation and the pilot project programme.

The Federation has confirmed OD support for ten branches. The scope of support will be determined based on a joint PMI-Federation assessment of the selected branches.

In September, the Federation OD unit assisted PMI in finalizing the recruitment of the PMI Yogyakarta chapter staff and plans to carry out an induction course for new staff members since none have Red Cross background and experience.

## **Federation Coordination**

To date, the Red Cross societies of Germany, Netherlands and Japan are still active in Yogyakarta and Central Java. The German Red Cross (GRC) focuses on disaster management with three components, namely disaster preparedness in schools, tsunami early warning system (TEWS), as well as command and organization. Together with other partner national societies in the area and PMI, the GRC will conduct a workshop on disaster preparedness in schools in Bangkok in October.

Three branches have followed the initiative taken by the GRC and PMI Central Java to promote discussion on and establishment of TEWS-related activities in three pilot areas previously identified by the government: Kebumen, Cilacap, and Bantul. The branches meet regularly, coordinated by PMI Central Java, to discuss the possible contribution to that early warning system. PMI activities are supported by the GRC and synchronized with the government's activities. In relation to TEWS, the GRC is in cooperation with German technical cooperation (Deutsche Gesellschaft für Technische Zusammenarbeit/GTZ).

The GRC has completed the branch capacity matrix with data of 40 branches in Central Java and Yogyakarta. The matrix data has been handed over to both chapters and will be developed into a simple and useful tool to accomplish tasks in planning, monitoring, bench-marking and branch profiling. They have also organized training for the person responsible for data maintenance and update in both chapters.

Additionally, the GRC has carried out a five-day project planning workshop including two days of training in project cycle management, facilitated by PMI headquarters. Yogyakarta and Central Java chapters and four branches (Bantul, Kota Yogya, Cilacap, and Kebumen) have gone through the different steps of project planning. As a result, they have developed stakeholder mappings, SWOT analysis, problem analysis, objective analysis, strategy analysis, and a plan of action. The planning concentrated on the project of building for disaster

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management in Yogyakarta and Central Java, and will be useful in terms of methodology and training for all further planning at the branches and chapters.

The Netherlands Red Cross (NLRC) focuses on people who have been disabled due to the earthquake. The national society supported a four-day training by Yakkum (a local NGO specializing in rehabilitation of the disabled), attended by ten PMI volunteers. The training focused on rehabilitation centering on psychosocial support. In the near future, the ten trained PMI volunteers will implement psychosocial support for the disabled.

The psychosocial activity will be conducted in October for the same 60 beneficiaries whose housing, and water and sanitation facilities are to be adapted for the disabled. The first ten visits will be on-the-job training with Yakkum. Out of 60 houses targeted for adaptation, 16 have been completed. This project is carried out by the NLRC in cooperation with IOM, and two local NGOs specializing in rehabilitation of the disabled, namely Yakkum (for Yogyakarta province area) and InterAksi (for Klaten area in Central Java).

The Japanese Red Cross has several projects on-going. They are currently in the process of constructing 100 rain water catchments system in Gunungkidul for the quake-affected victims. The project is done through the *gotong royong* system in Patuk.

They have distributed 62,799 school kits to elementary schools in the Yogyakarta province and the Klaten district of Central Java. In addition, they have distributed 350 kindergarten playing tools. This project aims to alleviate the economic burden for the quake victims and families under poverty, and accelerate the move towards normalcy of the society and education.

In the health sector, construction of three Puskesmas posts and six Pustu (community health clinic) in Bantul, Kulon Progo, Sleman, and Gunungkidul are taking place. A list of medical equipment for these facilities was made and procurement of the equipment has been requested from the Federation. The Japanese Red Cross will also support the construction of a pulmonary hospital; a detailed survey will be carried out in November.

The construction of the PMI branch of Yogyakarta municipality and Bantul district will be complete by the end of October and the provisional office in Bantul branch will be established. Additionally, through the Federation, they will contribute to the purchase of the PMI Yogyakarta chapter warehouse.

They also provide accessibility for the disabled by providing universal design lavatories for schools for the disabled (*sekolah luar biasa*/SLB) in Yogyakarta and raise the understanding for the need of barrier-free environments for the disabled. The first phase of 58 lavatory units in 17 SLB has been completed and handed over. For the preparation of the second phase, they are conducting research for 42 SLB in Yogyakarta and construction is expected to start in November. In addition, they plan to provide lavatories for the disabled at home. To date, the beneficiaries have been identified and a site detailed survey for the design is being conducted. The tender for contractor will take place in October.

In the livelihood sector, the Japanese Red Cross provides living supplies for the disabled who have lost their apparatus or have been newly disabled due to the quake. So far, they are carrying out assessment and have completed identification of beneficiaries using almost all data from NGOs in this field, and are now finalizing the most suitable equipment to be allocated to each beneficiary.

## How we work

*All International Federation assistance seeks to adhere to the [Code of Conduct for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations \(NGOs\) in Disaster Relief](#) and is committed to the [Humanitarian Charter and Minimum Standards in Disaster Response \(Sphere\)](#) in delivering assistance to the most vulnerable.*

### The Federation's Global Agenda

The International Federation's activities are aligned with under a Global Agenda, which sets out **four broad goals** to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".

### Global Agenda Goals:

- Reduce the numbers of deaths, injuries and impact from disasters.
- Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.
- Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.
- Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.

## Contact information

### For further information specifically related to this operation please contact:

- Indonesian Red Cross (PMI): Arifin M. Hadi (Head of Disaster Management Division); [arifinmhd\\_dm\\_pmi@yahoo.com](mailto:arifinmhd_dm_pmi@yahoo.com); mobile: +62.811.943.952; phone: +62.21.7992325 ext. 222.; fax: +62.21.7995188
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**[Donor Response list below; click here to return to the title page.](#)**

# International Federation of Red Cross and Red Crescent Societies

## Donor response to appeal MDRID001 - INDONESIA - YOGYAKARTA EARTHQUAKE

TIMEFRAME: 27 May 06 to 31 Dec 07

LOCATION: Indonesia

TOTAL AMOUNT SOUGHT:	37,150,648
TOTAL RECEIVED TO DATE:	37,297,827
APPEAL COVERAGE TO DATE:	100%

Updated on: 15 Oct 2007

Currency	Amount	Coordination & Implementation	Disaster Management	Health & Care	Humanitarian Values	Organisational Development	Total
		CHF	CHF	CHF	CHF	CHF	CHF
<b>BUDGET</b>			<b>37,150,648</b>				<b>37,150,648</b>

### FUNDING

#### Opening Balance

#### Income

##### Cash contributions

Albanian Red Cross	USD	10,000		11,710			11,710
American Red Cross	USD	1,398,250		1,735,408			1,735,408
Andorra Government	EUR	50,000		78,667			78,667
Andorra Red Cross	EUR	23,066		36,675			36,675
Australian Red Cross	CHF	253,799		253,799			253,799
Australian Red Cross (from Australian Government)	CHF	774,690		774,690			774,690
Austrian Red Cross	CHF	2,431		2,431			2,431
Belgium Red Cross (Flanders) (from Belgian Government)	EUR	276,427		437,655			437,655
Bosnia and Herzegovina Red Cross	EUR	25,565		39,856			39,856
British Red Cross	CHF	858		858			858
British Red Cross	GBP	1,330,392		3,031,944			3,031,944
Cambodia - Private Donors	USD	200		249			249
Canadian Red Cross	CAD	800,000		852,200			852,200
Canadian Red Cross	CHF	1,649		1,649			1,649
Canadian Red Cross (from Canadian Government)	CAD	1,633,500		1,809,225			1,809,225
Croatian Red Cross	CHF	220,000		220,000			220,000
Cyprus Red Cross	CHF	12,224		12,224			12,224
Czech Red Cross	USD	4,494		5,444			5,444
Danish Red Cross	CHF	139,154		139,154			139,154
Danish Red Cross (from Danish Government)	CHF	830,398		830,398			830,398
ECHO	EUR	2,165,397		3,402,272			3,402,272
Egyptian Red Crescent	USD	51,986		62,970			62,970
Estonia Government	EUR	32,000		49,888			49,888
Finnish Red Cross	EUR	80,000		124,720			124,720
Finnish Red Cross (from Finnish Government)	EUR	200,000		314,000			314,000
First Data Western Union	USD	150,000		184,500			184,500
German Red Cross	CHF	9,207		9,207			9,207

# International Federation of Red Cross and Red Crescent Societies

	Currency	Amount	Coordination & Implementation	Disaster Management	Health & Care	Humanitarian Values	Organisational Development	Total
			CHF	CHF	CHF	CHF	CHF	CHF
<b>BUDGET</b>			<b>37,150,648</b>					<b>37,150,648</b>
<b>FUNDING</b>								
<b>Opening Balance</b>								
<b>Income</b>								
Great Britain - Private Donors	GBP	500		1,140				1,140
Hellenic Red Cross	EUR	19,960		31,337				31,337
Hong Kong Red Cross	CHF	348,218		348,218				348,218
Hong Kong Red Cross	HKD	2,509,395		383,917				383,917
Irish Government	EUR	500,000		779,500				779,500
Irish Red Cross	EUR	273,970		430,763				430,763
Italian Govt Bilateral Emergency Fund	EUR	500,000		787,775				787,775
Japanese Government	USD	1,000,000		1,211,300				1,211,300
Japanese Red Cross	JPY	449,732,696		4,856,722				4,856,722
Japanese Red Cross	USD	1,888,810		2,327,345				2,327,345
Korea Republic Red Cross	CHF	347,278		347,278				347,278
Latvian Red Cross	EUR	25,000		39,250				39,250
Libyan Red Crescent	CHF	10,000		10,000				10,000
Liechtenstein Red Cross	CHF	30,000		30,000				30,000
Luxembourg Government	EUR	100,000		158,000				158,000
Luxembourg Red Cross	EUR	30,000		46,770				46,770
Macao Red Cross	CHF	30,000		30,000				30,000
Medicor Foundation	CHF	250,000		250,000				250,000
Monaco Red Cross	CHF	17,481		17,481				17,481
Monaco Red Cross	EUR	23,847		37,301				37,301
Netherlands - Private Donors	EUR	10,000		15,700				15,700
Netherlands Red Cross	CHF	4,043		4,043				4,043
Netherlands Red Cross	EUR	400,000		629,200				629,200
Netherlands Red Cross (from Netherlands Government)	EUR	1,000,000		1,559,000				1,559,000
New York Office	USD	25,446		31,299				31,299
New Zealand Red Cross	CHF	194,811		194,811				194,811
New Zealand Red Cross (from New Zealand Government)	CHF	380,650		380,650				380,650
Norwegian Red Cross	CHF	7,029		7,029				7,029
Norwegian Red Cross	NOK	350,000		69,265				69,265
Norwegian Red Cross (from Norwegian Government)	NOK	3,150,000		623,385				623,385
On Line donations	CHF	95,878		95,878				95,878
On Line donations (from Swedish Government)	CHF	2,908		2,908				2,908

# International Federation of Red Cross and Red Crescent Societies

	Currency	Amount	Coordination & Implementation CHF	Disaster Management CHF	Health & Care CHF	Humanitarian Values CHF	Organisational Development CHF	Total CHF
<b>BUDGET</b>				37,150,648				37,150,648
<b>FUNDING</b>								
<b>Opening Balance</b>								
<b>Income</b>								
OPEC Fund For International Developm	USD	600,000		702,600				702,600
Qatar Red Crescent	CHF	115,705		115,705				115,705
Senegal Private Donor	EUR	100		157				157
Singapore - Private Donors	EUR	50,000		77,950				77,950
Singapore Red Cross	CHF	57,353		57,353				57,353
Singapore Red Cross (from Singapore Government)	CHF	57,353		57,353				57,353
Slovenia Government (from Slovenian Red Cross)	EUR	41,606		65,322				65,322
Swedish Red Cross (from Swedish Government)	SEK	8,800,000		1,492,700				1,492,700
Swiss Red Cross	CHF	100,000		100,000				100,000
Switzerland - Private Donors	CHF	6,100		6,100				6,100
Switzerland - Private Donors	EUR	7,000		10,913				10,913
Unidentified donor	CHF	-56,206		-56,206				-56,206
United States - Private Donors	USD	10,400		12,599				12,599
USAID	IDR	925,000,000		121,791				121,791
VERF/WHO Voluntary Emergency Relief	CHF	4,000		4,000				4,000
<b>Total Cash contributions</b>				<b>32,927,394</b>				<b>32,927,394</b>
<b>Inkind Goods &amp; Transport</b>								
American Red Cross	CHF	231,200		231,200				231,200
Belgium Red Cross (Flanders)	EUR	582,995		908,890				908,890
British Red Cross	GBP	19,410		44,080				44,080
Canadian Red Cross	CHF	191,164		191,164				191,164
Danish Red Cross	DKK	163,733		34,630				34,630
German Red Cross	CHF	160,528		160,528				160,528
Japanese Red Cross	JPY	167,719,128		1,851,619				1,851,619
Spanish Red Cross	CHF	22,578		22,578				22,578
USAID	USD	361,500		445,730				445,730
<b>Total Inkind Goods &amp; Transport</b>				<b>3,890,418</b>				<b>3,890,418</b>
<b>Inkind Personnel</b>								
Australian Red Cross	CHF	127,200		127,200				127,200
Austrian Red Cross	CHF	37,257		37,257				37,257
British Red Cross	CHF	13,200		13,200				13,200
Canadian Red Cross	CHF	25,557		25,557				25,557
Danish Red Cross	CHF	7,393		7,393				7,393
French Red Cross	CHF	4,097		4,097				4,097

## International Federation of Red Cross and Red Crescent Societies

	Currency	Amount	Coordination & Implementation	Disaster Management	Health & Care	Humanitarian Values	Organisational Development	Total
			CHF	CHF	CHF	CHF	CHF	CHF
<b>BUDGET</b>				37,150,648				37,150,648
<b>FUNDING</b>								
<u>Opening Balance</u>								
<b>Income</b>								
New Zealand Red Cross	CHF	152,970		152,970				152,970
Norwegian Red Cross	CHF	107,935		107,935				107,935
<b>Total Inkind Personnel</b>				<b>475,609</b>				<b>475,609</b>
<b>Other Income</b>								
Services & Recoveries	CHF	4,405		4,405				4,405
<b>Total Other Income</b>				<b>4,405</b>				<b>4,405</b>
<b>Total Income</b>				<b>37,297,827</b>				<b>37,297,827</b>
<b>TOTAL FUNDING</b>			<b>0</b>	<b>37,297,827</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>37,297,827</b>
<b>COVERAGE</b>			<b>0%</b>	<b>100%</b>	<b>0%</b>	<b>0%</b>	<b>0%</b>	<b>100%</b>